

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE    |
|---------------------------|----------|--------|---------|
| FEE DETERMINATION         | 18       |        | 5-23-01 |
| O.I.P.E. CLASSIFIER       |          |        |         |
| FORMALITY REVIEW          | ER       | 106    | 8-29-01 |
| RESPONSE FORMALITY REVIEW | 18       | 102    | 10-1-01 |

INDEX OF CLAIMS

✓ \_\_\_\_\_ Rejected      N \_\_\_\_\_ Non-elected  
 ○ \_\_\_\_\_ Allowed      I \_\_\_\_\_ Interference  
 (Through numerals) \_\_\_\_\_ Cancelled      A \_\_\_\_\_ Appeal  
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If more than 150 claims or 10 actions  
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